FORM D



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTION



SEC USE ONLY				
Prefix	Serial			
DATE RECEIVED				

Name of Offering (☐ check	if this is an amendment and	d name has changed, and in	ndicate change.)		
InvestBio Short Term Opportunity	Fund, L.P.				
Filing Under (Check box(es) the	at apply): Rule 504	☐ Rule 505 🛮 Rule 506	☐ Section 4(6) ☐ UI	LOE	
Type of Filing: 🛮 New Filin	g 🛘 Amendment				
	A. BASIC	IDENTIFICATION DATA			
1. Enter the information reques					
Name of Issuer (☐ check if	this is an amendment and na	ame has changed, and indi-	cate change.)		
InvestBio Short Term Opportunity	/ Fund, L.P.				
Address of Executive Offices (Number and Street, City, State, Zip Code)			Telephone Number (Including Area Code)		
500 Fifth Avenue, 56th Floor, New York, NY 10110			(212) 739-7676		
Address of Principal Business (if different from Executive Off		eet, City, State, Zip Code)	Telephone Number (Incl	uding Area Code)	
Brief Description of Business Investment partnership (securities	. • •				
	· <u>\$</u>			PROCESSED	
Type of Business Organization ☐ corporation	limited partnership,	already formed	□ other (please specify):	OCT 2 6 2004	
☐ business trust	☐ limited partnership,	to be formed		THOMSON	
Actual or Estimated Date of In Jurisdiction of Incorporation or			☑ Actual ☐ Estimated		
	CN for Can	ada; FN for other foreign	jurisdiction)	DE	

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first,	if individual)				
IB Partners Management, Inc.					
Business or Residence Addre	ess (Number a	nd Street, City, State, Z	Cip Code)		
500 Fifth Avenue, New York,	NY 10110				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Mathis, Scott					
Business or Residence Addre	ess (Number a	nd Street, City, State, Z	Zip Code)		· · · · · · · · · · · · · · · · · · ·
IB Partners Management, Inc.,	500 Fifth Avenue	e, New York, NY 10110			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)			,	
Robbins, Ronald					
Business or Residence Addre	ess (Number a	nd Street, City, State, Z	Zip Code)	*	
IB Partners Management, Inc.,	500 Fifth Avenue	e, New York, NY 10110			
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ss (Number a	and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)		-		
Business or Residence Addre	ess (Number a	and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)			,	
Business or Residence Addr	ess (Number a	and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number a	and Street, City, State, 2	Zip Code)		
	(Use blank shee	t, or copy and use additi	ional copies of this sheet	, as necessary.))

B. INFORMATION ABOUT OFFERING		
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		No ⊠
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?	0,000.0	0
3. Does the offering permit joint ownership of a single unit?		No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commis-		_
sion or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only		
Full Name (Last name first, if individual)		
InvestPrivate, Inc.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
500 F/01 A		
500 Fifth Avenue, New York, NY 10110 Name of Associated Broker or Dealer		
Name of Associated Bloker of Deater		
Same		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	All Sta	atec
[AL] [AK] [AZ] [AR] (CA) (CO) [CT] [DE] [DC] (FL) (GA) [HI]	[ID]	aics
(IL) [IN] [IA] [KS] [KY] [LA] [ME] [MD] (MA) (MI) [MN] [MS]	[MO]	
	(PA))
[RI] [SC] [SD] [TN] (TX) [UT] (VT) [VA] [WA] [WV] [WI] [WY]	[PR]	
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Business of Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
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	[MO] [PA]	
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]	
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Business of Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt \$____ 0.00 □ Common □ Preferred 0.00 \$_ 0.00 1,332,730.09 0.00 0.00 _____)......\$___ Other (Specify___ 1,332,730.09 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases 24 s 1,332,730.09 Accredited Investors..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Security Sold Type of offering _ \$__ _____ \$____ Furnish a statement of all expenses in connection with the issuance and distribution of the

Total \$______\$ securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 3,000.00 15,000.00 Engineering Fees 66,636.50 Sales Commissions (specify finders' fees separately)..... Other Expenses (identify) ____ ______ 84,636.50

	C. OFFERING PRICE, NUMBER	OF INVESTORS, EXPENSES AND I	<u>USE O</u>	F PROCEEDS	3	
	b. Enter the difference between the aggregate offering tion 1 and total expenses furnished in response to Paradjusted gross proceeds to the issuer."	art C - Question 4.a. This difference i	s the		\$	3,915,363.50
5.	Indicate below the amount of the adjusted gross prodused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate, the adjusted gross proceeds to the issuer set forth in	for any purpose is not known, furnis. The total of the payments listed must	sh an equal			
		•		Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees		□ \$		_ 🗆 \$ _	
	Purchase of real estate		□ \$		_ 🗆 \$ _	
	Purchase, rental or leasing and installation of mac	chinery and equipment	□ \$		_ 🗆 \$ _	
	Construction or leasing of plant buildings and faci	ilities	□ s		_ 🗆 \$ _	
	Acquisition of other businesses (including the va offering that may be used in exchange for the as issuer pursuant to a merger)	sets or securities of another	□ \$		_ 🗆 \$_	
	Repayment of indebtedness		□ \$		_ 🗆 \$ _	
	Working capital		□ s		_ 🗆 \$.	
	Other (specify): Proceeds to be invested in securities	s, and to pay annual management fee	□ \$		_ □ \$ _	3,915,363.50
	and organizational expenses.		□ s		_ 🗆 s _	
	Column Totals		□ \$		_ 🗆 \$ _	3,915,363.50
	Total Payments Listed (column totals added)			□ \$ <u>3,915,363.50</u>		
	D	. FEDERAL SIGNATURE				
fo	ne issuer has duly caused this notice to be signed by the lowing signature constitutes an undertaking by the issuest of its staff, the information furnished by the issue	suer to furnish to the U.S. Securities as	nd Exc	change Commi	ssion, up	on written re-
Is	suer (Print or Type)	Signature		Date		
In	vestBio Short Term Opportunity Fund, L.P.	XM		Octo	ber 15, 20	004
N	ame of Signer (Print or Type)	Title of Signer (Print or Type)				
S	cott L. Mathis	President, IB Partners Management, Inc.	(Gene	ral Partner)		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)